	Virginia Integrated Plan NHSP Indicators 2022-2026 (2020 and 2021 Data Not Included Due to COVID-19 Pandemic)										
Indicator Title & Number	Definition & Source	nition & Data Virginia By Year Virginia 3 Year			2026 Virginia Target	National Target					
			2017	2018	2019	Average	Percent				
1. Increase knowledge of status to 95% by 2026	Numerator: Number of persons aged ≥13 years living with diagnosed HIV at end of a measurement year. Denominator: Estimated number of		Num: 22,945	Num: 23,869	Num: 24,747	Num 23,886	86.11%	95.00%	By 2025, increase to knowledge of HIV status to 95%.		
	persons aged ≥13 years living with diagnosed or undiagnosed HIV at the end of a measurement year.¹	Data are published annually	Den: 27,100	Den: 27,600	Den: 28,400	Den 27,700					
2. Reduce new infections in Virginia by 25% by 2026	Incidence is the estimated number of new HIV infections among persons aged ≥13 years that occurred in the measurement year and includes diagnosed and undiagnosed infections.¹		810	780	750	780	N/A	585	By 2025, reduce incidence by 75% from baseline. By 2030, reduce incidence by 90% from baseline.		

3. Reduce new HIV diagnosis in Virginia by 25% by 2026	Number of persons ≥13 years who have received laboratory or clinical confirmation of HIV in a measurement year. ¹		882	881	851	871	NA	218	By 2025, reduce diagnoses by 75% from baseline. By 2030, reduce diagnoses by 90% from baseline. A
4. Increase timely linkage to care in Virginia to 95% by 2026	Numerator: Number of persons aged ≥13 years with HIV diagnosed in a measurement year and who had ≥1 viral load (VL) or CD4 test <1 month after HIV	Data are published annually. Preliminary data are also available	Num: 631	Num: 635	Num: 629	Num: 632	72.49%	95%	By 2025, increase to 95%. ^B
	diagnosis. Denominator: Number of persons aged ≥13 years with HIV infection diagnosed during a measurement year.¹	quarterly.	Den: 882	Den: 881	Den: 851	Den: 871			
5. Increase viral suppression among PWA in Virginia to 80% by 2026	Numerator: Number of persons aged ≥13 years living with diagnosed HIV and have a viral load test result <200 copies/mL at the most recent viral load test during a measurement year.	Data are published annually	Num 11,759	Num 13,658	Num 15,123	Num 13,513	59.89%	80%	By 2025, increase to 95%. ^C

	Denominator: Number of persons aged ≥13 years living with diagnosed HIV by the end of the year prior to the measurement year and alive at the end of the measurement year.		Den 21,650	Den 22,579	Den 23,462	Den 22,564				
5A. Increase viral	Same as # 5	Same as #5	Num 5,966	Num 7,089	Num 7,952	Num 7,002	62.74%	80%	Increase viral suppression among MSM diagnosed with	
suppression among MSM to 80% by 2026			Den 1,0656	Den 11,152	Den 11,673	Den 11,160			HIV to 95% from a 2017 baseline of 62.74%. ^D	
5B. Increase viral suppression	Same as #5	Same as #5	Num 2,803	Num 3,350	Num 3,776	Num 3,310	62.36%	80%	Increase viral suppression among Black MSM diagnosed with HIV to 95.% from a 2017	
among Black MSM to 80% by 2026			Den 5,043	Den 5,306	Den 5,573	Den 5,307			baseline of 58.4%. ^E	
5C. Increase viral suppression	Same as #5	Same as #5	Num 533	Num 640	Num 723	Num 632	57.80%	80%	Increase viral suppression among Latino MSM diagnosed with HIV to 95. % from a 2017	
among Latino MSM to 80% by 2026			Den 1022	Den 1093	Den 1165	Den 1,093			baseline of 64.9%. ^F	
5D. Increase viral suppression	Same as # 5	Same as #5	Num 2,336	Num 2,671	Num 2,896	Num 7,903	63.26%	among Black women dia	Increase viral suppression among Black women diagnosed with HIV to 95.00% from a	
among Black Women to 80% by 2026			Den 4,035	Den 4,164	Den 4,294	Den 4,164			2017 baseline of 59.30%. ^G	

5E. Increase viral suppression among	Same as # 5	Same as # 5	Num 110	Num 138	Num 152	Num 133	69.44%	80%	Increase viral suppression among transgender women in HIV medical care to 95.00% from a 2017 baseline of	
Transgender Women to 80% by 2026			172	192	210	192			80.50%. ^H	
5F. Increase viral suppression	Same as # 5	Same as #5	Num 748	Num 831	Num 884	Num 821	51.18%	80%	Increase viral suppression among people who inject drugs diagnosed with HIV to 95.00%	
among PWID to 80% by 2026			Den 1,588	Den 1,603	Den 1,621	Den 1,604			from a 2017 baseline of 54.90%. ¹	
5G. Increase viral suppression	Same as # 5	Same as #5	Num 394	Num 446	Num 475	Num 6,746	53.52%	95%	Increase viral suppression among youth aged 13–24 diagnosed with HIV to 95.00% from a 2017 baseline of 57.10%. ^J	
among Youth aged 13-24 to 80% by 2026			Den 842	Den 835	Den 780	Den 13,999				
6. Decrease HIV stigma in Virginia by 25% by 2026	Definition: The median score of a 10-item stigma scale, ranging from 0 (no stigma) to 100 (high stigma), measured among persons aged >18 years living with diagnosed HIV infection living in the United States and Puerto Rico.	Data are published annually.	N/A	31.2	N/A	N/A	N/A	23.4	By 2025, decrease by 50%. Indicator: 31.2 represents the median score. K, L	
7. Reduce homelessness among PWA in Virginia by 50% by 2026	Numerator: Number of persons aged ≥18 years living with diagnosed HIV in a measurement year and report having been homeless during	Data are published annually.	9.10%	NA	NA	NA	N/A	4.5%	By 2025, reduce by 50.00%. ^L	

	the 12 months prior to									
	interview.									
	Homelessness is									
	defined as living on the									
	street, living in a									
	shelter, living in a									
	single-room-occupancy									
	hotel, or living in a car.									
	<u>Denominator</u> : A sample									
	of persons aged ≥18									
	years living with									
	diagnosed HIV in a									
	measurement year, as									
	documented in the									
	medical record.									
99. Quality of	Pending guidance from the	ne White House	National	HIV Strateg	gic Plan on	the appropr	riate quality	of life meas	ures.	
life measure										

Indicator Notes

- A. Provisional annual data (annual data with \ge 12 months of reporting delay) will be used to measure progress.
- **B.** Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC. The number of jurisdictions may vary each year. Provisional annual data (annual data with ≥ 12 months of reporting delay) will be used to measure progress.
- C. Increase viral suppression among individuals diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- **D.** Increase viral suppression among individuals diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- **E.** Increase viral suppression among individuals diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.

- **F.** Increase viral suppression among LATINO MSM diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- G. Increase viral suppression among BLACK WOMEN diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- **H.** Increase viral suppression among TRANSGENDER WOMEN diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- I. Increase viral suppression among people who inject drugs diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- **J.** Increase viral suppression YOUTH diagnosed with HIV. Data are reported for jurisdictions with complete laboratory reporting of CD4 and viral load test results to CDC and with complete death ascertainment. The number of jurisdictions may vary each year.
- **K.** The stigma scale was revised for the 2018 data collection cycle and includes three questions with a 12-month reference period to allow participants to provide experiences in a defined and more recent period of time for one domain of stigma (personalized stigma).
- L. Only one year of data were available for the reduction of stigma and the reduction of homelessness. Data Sources-
 - 1. National HIV Surveillance System (NHSS).11 NHSS is the primary source for monitoring trends in HIV in the United States. It is the data source for incidence, diagnoses, and other HIV care continuum data.
 - 2. Medical Monitoring Project (MMP). MMP is a cross-sectional, nationally representative, complex sample survey that assesses the behavioral and clinical characteristics of adults with diagnosed HIV infection in the United States. MMP also provides information on behaviors and clinical outcomes affecting the risk of HIV transmission, morbidity, and mortality. In 2015, MMP sampling and weighting methods were revised to include all adults with diagnosed HIV infection regardless of HIV care status.